

TO: Outreach Partners and Interested Parties

FROM: Prescription Advantage

Date: November 20, 2006

## BULLETIN

This bulletin is one in a series of routine updates regarding Prescription Advantage. These notices are designed to inform a broad network of outreach partners and other interested parties about Plan updates affecting both current and future Plan members.

# Plan Change Letters for Medicare Members

Over the next week Prescription Advantage members will receive a letter that explains how their Prescription Advantage benefits will work in 2007. Changes for 2007 include new annual out-of-pocket spending limits and premium subsidies will be determined using the regional benchmark of \$27.35. Member co-payments will remain the same.

Prescription Advantage members are also reminded that they are entitled to a Special Election Period (SEP), allowing them to join or switch their Medicare drug plan outside of a Medicare open enrollment period.

Sample letters are attached.



Dear Prescription Advantage Member:

The new Prescription Advantage plan year begins on January 1, 2007. The chart below explains how your Prescription Advantage benefits will work in 2007 (note that you are currently enrolled in <u>membership category S2</u>).

With Prescription Advantage You Will Pay		
Monthly Premium	<ul> <li>\$0 for a Basic Medicare plan that has a monthly premium of \$27.35 or less.</li> <li>If you select a Basic Medicare drug plan with a monthly premium that is higher than \$27.35, you will pay the difference.</li> <li>If you select an Enhanced Medicare drug plan you will be responsible for a portion of the premium.</li> <li>Note: You will receive an additional mailing from Prescription</li> </ul>	
	Advantage detailing the premiums for each plan in the near future.	
Co-payments	<ul> <li>No more than \$7 for generic drugs covered by your Medicare drug plan.</li> <li>No more than \$18 for brand name drugs covered by your Medicare drug plan.</li> </ul>	
Annual Out-of- Pocket Spending Limit	• \$0 for prescription drugs covered by your Medicare drug plan once the total amount you spent for co-payments reaches \$1,470.	

In addition, Prescription Advantage will pay for benzodiazepines, a class of prescription drugs not covered by most Medicare drug plans.

Your premium may change in 2007 for your Medicare or Medicare Advantage drug coverage. Complete information regarding the specific premiums for each plan was not available at the time that this mailing was created. When this information is available, we will send you detailed information regarding exactly how much your Medicare prescription drug premium will be in 2007. Please keep this letter in a safe place so that you may reference it when you receive this additional information. You should also receive information directly from your plan regarding any changes to your coverage in 2007.

- ♦ If Prescription Advantage is paying a portion of your Medicare drug plan's monthly premium, do not have your premium automatically deducted from your Social Security check. Prescription Advantage will need to coordinate the payment of your premium assistance directly with your Medicare drug plan.
- Prescription Advantage helps pay premiums based on the Basic premium amount. If you are responsible for a late enrollment p enalty or if you choose to join an Enhanced Medicare drug plan, you will be responsible for paying any additional fees.
- ♦ Members of Prescription Advantage are entitled to a Special Election Period, allowing them to join or switch their Medicare drug plan o utside of a Medicare open enrollment period. Should you choose to utilize this Special Election Period, you will need to submit proof that you are a member of Prescription Advantage to the Medicare drug plan you've chosen. You may use a copy of this letter as proof that you are a member of Prescription Advantage, Massachusetts' state pharmacy assistance program (SPAP).

If you have any questions, please call Customer Service at 1 -800-AGE-INFO (1-800-243-4636) or TTY (toll free) for the deaf and hard of he aring at 1-877-610-0241.

Sincerely,



Dear Prescription Advantage Member:

The new Prescription Advantage plan year begins on January 1, 2007. The chart below explains how your Prescription Advantage benefits will work in 2007 (note that you are currently enrolled in **membership category S3**).

With Prescription Advantage You Will Pay		
Monthly Premium	<ul> <li>\$20 for a Basic Medicare plan that has a monthly premium of \$27.35 or less.</li> <li>If you select a Basic Medicare drug plan with a monthly premium that is higher than \$27.35, you will pay the difference in addition to the \$20.</li> <li>If you select an Enhanced Medicare drug plan you will be responsible for a portion of the premium.</li> <li>Note: You will receive an additional mailing from Prescription Advantage detailing the premiums for each plan in the near future.</li> </ul>	
Co-payments	<ul> <li>No more than \$12 for generic drugs covered by your Medicare drug plan.</li> <li>No more than \$30 for brand name drugs covered by your Medicare drug plan.</li> </ul>	
Annual Out-of-Pocket Spending Limit	• \$0 for prescription drugs covered by your Medicare drug plan once the total amount you spent for co-payments reaches \$1,845.	

In addition, Prescription Advantage will pay for benzodiazepines, a class of prescription drugs not covered by most Medicare drug plans.

Your premium may change in 2007 for your Medicare or Medicare Advantage drug coverage. Complete information regarding the specific premiums for each plan was not available at the time that this mailing was created. When this information is available, we will send you detailed information regarding exactly how much your Medicare prescription drug premium will be in 2007. Please keep this letter in a safe place so that you may reference it when you receive this additional information. You should also receive information directly from your plan regarding any changes to your coverage in 2007.

- ♦ If Prescription Advantage is paying a portion of your Medicare drug plan's monthly premium, do not have your premium automatically deducted from your Social Security check. Prescription Advantage will need to coordinate the payment of your premium assistance directly with your Medicare drug plan.
- Prescription Advantage helps pay premiums based on the Basic premium amount. If you are responsible for a late enrollment penalty or if you choose to join an Enhanced Medicare drug plan, you will be responsible for paying any additional fees.
- ♦ Members of Prescription Advantage are entitled to a Special Election Period, allowing them to join or switch their Medicare drug plan outside of a Medicare open enrollment period. Should you choose to utilize this Special Election Period, you will need to submit proof that you are a member of Prescription Advantage to the Medicare drug plan you've chosen. You may use a copy of this letter as proof that you are a member of Prescription Advantage, Massachusetts' state pharmacy assistance program (SPAP).

If you have any questions, please call Customer Service at 1-800-AGE-INFO (1-800-243-4636) or TTY (toll free) for the deaf and hard of hearing at 1-877-610-0241.

Sincerely,



Dear Prescription Advantage Member:

The new Prescription Advantage plan year begins on January 1, 2007. The chart below explains how your Prescription Advantage benefits will work in 2007 (note that you are currently enrolled in **membership category S4**).

With Prescription Advantage You Will Pay			
<b>Monthly Premium</b>	• 100% of your Medicare Drug Plan's monthly premium.		
Co-payments	• No more than \$12 for generic drugs covered by your Medicare drug plan.		
	• No more than \$30 for brand name drugs covered by your Medicare drug plan.		
Annual Out-of-Pocket Spending Limit	• \$0 for prescription drugs covered by your Medicare drug plan once the total amount you spent for co-payments reaches \$2,205.		

In addition, Prescription Advantage will pay for benzodiazepines, a class of prescription drugs not covered by most Medicare drug plans.

Your premium may change in 2007 for your Medicare or Medicare Advantage drug coverage. Complete information regarding the specific premiums for each plan was not available at the time that this mailing was created. When this information is available, we will send you detailed information regarding exactly how much your Medicare prescription drug premium will be in 2007. Please keep this letter in a safe place so that you may reference it when you receive this additional information. You should also receive information directly from your plan regarding any changes to your coverage in 2007.

- ♦ If Prescription Advantage is paying a portion of your Medicare drug plan's monthly premium, do not have your premium automatically deducted from your Social Security check. Prescription Advantage will need to coordinate the payment of your premium assistance directly with your Medicare drug plan.
- ◆ Prescription Advantage helps pay premiums based on the Ba sic premium amount. If you are responsible for a late enrollment penalty or if you choose to join an Enhanced Medicare drug plan, you will be responsible for paying any additional fees.
- ♦ Members of Prescription Advantage are entitled to a Special Election Period, allowing them to join or switch their Medicare drug plan outside of a Medicare open enrollment period. Should you choose to utilize this Special Election Period, you will need to submit proof that you are a member of Prescription Advantage to the Medicare drug plan you've chosen. You may use a copy of this letter as proof that you are a member of Prescription Advantage, Massachusetts' state pharmacy assistance program (SPAP).

If you have any questions, please call Customer Service at 1 -800-AGE-INFO (1-800-243-4636) or TTY (toll free) for the deaf and hard of hearing at 1 -877-610-0241.

Sincerely,



Dear Prescription Advantage Member:

The new Prescription Advantage plan year begins on January 1, 2007. The chart below explains how your Prescription Advantage benefits will work in 2007 (note that you are currently enrolled in <u>membership category S5</u>).

With Prescription Advantage You Will Pay			
<b>Annual Enrollment</b>	•	\$200 Prescription Advantage Annual Enrollment Fee	
Fee			
Medicare's Annual	•	100% of your Medicare Drug Plan's deductible	
Deductible			
<b>Monthly Premium</b>	•	100% of your Medicare Drug Plan's monthly premium	
Co-payments	•	100% of your Medicare Drug Plan's co-payment	
<b>Annual Out-of-Pocket</b>	•	\$0 for prescription drugs covered by your Medicare drug	
Spending Limit		plan once the total amount you spent for co-payments	
		reaches \$2,940.	

In addition, Prescription Advantage will pay for benzodiazepines, a class of prescription drugs not covered by most Medicare drug plans.

Your premium may change in 2007 for your Medicare or Medicare Advantage drug coverage. Complete information regarding the specific premiums for each plan was not available at the time that this mailing was cre ated. When this information is available, we will send you detailed information regarding exactly how much your Medicare prescription drug premium will be in 2007. Please keep this letter in a safe place so that you may reference it when you receive this additional information. You should also receive information directly from your plan regarding any changes to your coverage in 2007.

- ♦ If Prescription Advantage is paying a portion of your Medicare drug plan's monthly premium, do not have your premium automatically deducted from your Social Security check. Prescription Advantage will need to coordinate the payment of your premium assistance directly with your Medicare drug plan.
- Prescription Advantage helps pay premiums based on the Basic premium amount. If you are responsible for a late enrollment penalty or if you choose to join an Enhanced Medicare drug plan, you will be responsible for paying any additional fees.
- ♦ Members of Prescription Advantage are entitled to a Special Election Period, allowing them to join or switch their Medicare drug plan outside of a Medicare open enrollment period. Should you choose to utilize this Special Election Period, you will need to submit proof that you are a member of Prescription Advantage to the Medicare drug plan you've chosen. You may use a copy of this letter as proof that you are a member of Prescription Advantage, Massachusetts' state pharmacy assistance program (SPAP).

If you have any questions, please call Customer Service at 1 -800-AGE-INFO (1-800-243-4636) or TTY (toll free) for the deaf and hard of hearing at 1 -877-610-0241.

Sincerely,